

APPLICATION DATA SHEET**Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks:: 0

Number of copies of CDs:: 0

Sequence submission?:: No

Computer Readable Form (CRF)?:: No

Number of copies of CRF:: 0

Title :: PESTICIDE AND FUNGICIDE TREATMENTS
MADE FROM HOP EXTRACTS

Attorney Docket Number:: 50557-6

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 0

Small Entity?:: Yes

Petition included?:: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Gene
Middle Name::	
Family Name::	Probasco
Name Suffix::	
City of Residence::	Yakima
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	510 Friedline Road
City of mailing address::	Yakima
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98908

Second Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Mark
Middle Name::	M.
Family Name::	Bossert
Name Suffix::	
City of Residence::	Yakima
State or Province of Residence::	WA
Country of Residence::	US

Street of mailing address::	6910 West Prasch
City of mailing address::	Yakima
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98908

Third Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	David
Middle Name::	W.
Family Name::	Hysert
Name Suffix::	
City of Residence::	Yakima
State or Province of Residence::	WA
Country of Residence::	US
Street of mailing address::	6006 Englewood Avenue
City of mailing address::	Yakima
State or Province of mailing address::	WA
Country of mailing address::	US
Postal or Zip Code of mailing address::	98908

Correspondence Information

Correspondence Customer Number::	22504
Name::	Bruce A. Kaser
Street of mailing address::	1501 Fourth Avenue, #2600
City of mailing address::	Seattle

State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98101-1688
Phone number:: (206) 622-3150
Fax number:: (206) 628-7699
E-Mail address:: brucekaser@dwt.com

Representative Information

Representative Customer Number::		22504
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	